2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006
Secretary of State

DOCUMENT# P96000001397

Entity Name: COMMUNITY HOME MORTGAGE SERVICES, INC.

Current Principal Place of Business:

22079 KIMBLE AVE
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

PO BOX 494388
PORT CHARLOTTE, FL 33949

New Mailing Address:

22079 KIMBLE AVENUE
PORT CHARLOTTE, FL 33952

FEI Number: 65-0630101 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIKORSKI, MICHAEL J
P.O. BOX 495840
PORT CHARLOTTE, FL 33949 US

Name and Address of New Registered Agent:

SIKORSKI, MICHAEL J
22079 KIMBLE AVENUE
PORT CHARLOTTE, FL 33949 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MICHAEL J SIKORSKI 02/06/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete
Name: SIKORSKI, BECKY P
Address: P.O. BOX 495840
City-St-Zip: PORT CHARLOTTE, FL 33949

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change ( ) Addition
Name: SIKORSKI, BECKY P
Address: 22079 KIMBLE AVENUE
City-St-Zip: PORT CHARLOTTE, FL 33952

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BECKY P SIKORSKI PSTD 02/06/2006
Electronic Signature of Signing Officer or Director Date